

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

American Podiatric Medical Association Podiatry Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Charles A. Gonzalez Congressional Campaign

Mailing Address P.O. Box 83142

City Gaithersburg State MD Zip Code 20883

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Charlie A. Gonzalez

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: TX District: 20

2008 Primary Electio

Transaction ID: 14731671

Date of Disbursement

11 / 11 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** Darlene Hooley For Congress

Mailing Address P.O. Box 2050

City Salem State OR Zip Code 97308

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Darlene Hooley

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: OR District: 5

2008 Primary Electio

Transaction ID: 14731673

Date of Disbursement

11 / 11 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Friends of Lois Capps

Mailing Address PO Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Lois Capps

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: CA District: 22

2008 Primary Electio

Transaction ID: 14731668

Date of Disbursement

11 / 11 / 2007

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....